

Ontario Health Coalition

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Attn: Assignment Editor

Ontario Health Coalition Releases Four Demands to Protect Public Interest: Warns Ontario Budget Puts Health Care in Peril

Toronto – As the Ontario budget debate begins in the legislature, the Ontario Health Coalition warned that the budget as it is now written would dismantle community hospitals and curtail access to care for thousands of elderly residents on wait lists. The coalition released four key demands to protect the public interest and access to health care.

“While people are willing to endure the hardship of travelling for highly specialized care, the public rightfully expects that they will have a local community hospital that provides a relatively comprehensive set of services that they need. But what the public doesn’t yet know, is that in the provincial budget as it is currently written, the McGuinty government has launched a plan to dismantle community hospitals,” warned Natalie Mehra, health coalition director.

“McGuinty’s plan is the opposite of what Ontarians want and expect: patients will have to travel from site to site and town to town for a whole range of services that have never been disclosed to the public,” she said.

The government has proposed a funding freeze and changes to the hospital funding formula, that will put the majority of Ontario’s hospitals into deficit, forcing them to cut services, she noted. “McGuinty’s plan is to use underfunding to force community hospitals to shrink to a smaller range of services.”

“If that isn’t enough, McGuinty has decided that long-term care homes are too expensive also, and has set funding levels so low that the 30,000 people now on wait lists for long-term care cannot possibly be provided access to the care they need,” she added. “While increased funding for home care is welcome, it is nowhere near sufficient to meet community need, and the government continues to ignore the pressing need to reform Ontario’s home care system.”

“In our communities, nurses are seeing is that beds are so tight that patients are discharged too early. They are unable to cope and return to emergency again and again,” added Shirley Roebuck, a Registered Nurse.

“We are very concerned that the inadequate hospital funding announced in the budget will put rural hospitals at risk for closure or major cuts,” she added. “Rural Ontarians pay taxes and vote too. Our rural hospitals play a pivotal role in Ontario’s health system stabilizing patients and allowing patients to recover in their home communities where family and friends can provide support. As rural services are cut, we are seeing the emergence of a two-tier health system that eliminates the chance for rural residents to receive the health care services they are entitled to.”

The coalition released four key demands to protect the public interest and access to health care:

1. a. Ontario has a 98% hospital occupancy rate – far higher than other jurisdictions. Long waits in emergency departments for hospital admissions and extraordinary hospital overcrowding show that Ontario has cut hospitals too deeply. We are calling for a moratorium on bed cuts and a proper, evidence-based bed study.

b. Services in small and rural hospitals are at risk. In the past few years, emergency departments, acute care beds and core services have been closed in Burk’s Falls, Shelbourne, Port Colborne and Fort Erie. Changes to the hospital funding formula will put more strain on the available funding for rural hospitals. We are calling for a moratorium on closures/closure of major services in rural hospitals.
2. As hospital beds have been cut, long-term care and home care increases have never kept pace. Wait times have tripled since 2005 for long-term care facilities, and home care is more severely rationed than ever. We

are calling for adequate funding to maintain existing services and address wait times in the public system: across the continuum (ltc, home care, hospitals).

3. Each round of restructuring has been accompanied by privatization of the ownership of new health care services. The majority of home and long-term care are now controlled by for-profit companies. Community laboratories, rehabilitation and outpatient clinics have been/are being privatized. There is a serious risk that new funding mechanisms and restructuring will lead to for-profit privatization of clinical hospital services. We are calling for a commitment to stop privatization of health care services, including long-term and home care.
4. The government has proposed a new funding formula for hospitals that includes the movement away from global funding to a market-based funding per procedure mechanism (fee-for-service funding). This system has been used in Britain and has resulted in serious financial instability, removal of services from local hospitals, privatization, and increased administrative costs. We are calling for open public consultations on this plan that will have serious consequences for vital health services in our communities.

For more information: OHC office 416-441-2502.